

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO <i>10663286</i>	FILING DATE <i>09-16-03</i>	
							APPLICANT(B)		
CLAIMS									
AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT					
IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					51	/		
2	/					52	/		
3	/					53	/		
4	/					54			
5	/					55			
6	/					56			
7	/					57			
8	/					58			
9	/					59			
10	/					60			
11	/					61			
12	/					62			
13	/					63			
14	/					64			
15	/					65			
16	/					66			
17	/					67			
18	/					68			
19	/					69			
20	/					70			
21	/					71			
22	/					72			
23	3					73			
24	3					74			
25	3					75			
26	3					76			
27	3					77			
28	3					78			
29	3					79			
30	3					80			
31	3					81			
32	/					82			
33	/					83			
34	/					84			
35	/					85			
36	/					86			
37	/					87			
38	/					88			
39	/					89			
40	/					90			
41	/					91			
42	/					92			
43	/					93			
44	/					94			
45	/					95			
46	/					96			
47	/					97			
48	/					98			
49	/					99			
50	/					100			
TOTAL IND.						TOTAL IND.		5	
TOTAL DEP.						TOTAL DEP.		16	
TOTAL CLAIMS						TOTAL CLAIMS		21	